

REMARKS

Claims 1-5 and 7 are all the claims pending in the application. Claims 1 and 7 have been amended. Support for the amendments can be found in the specification, for example at page 2, lines 12-15 and in Figure 3. Therefore, no new matter has been added. Accordingly, entry of the present Amendment is respectfully requested.

Referring to page 2 of the Office Action, Claims 1-5 and 7 stand rejected under 35 U.S.C. § 112, first paragraph, as allegedly failing to comply with the written description requirement. In this regard, it is indicated that while the specification “discloses the corrugated section increasing the flexibility of the tubular body,” it fails to provide support for, “wherein the corrugated section has a flexibility to that of another section of the hollow body.” Applicants respectfully traverse the rejection for the following reasons.

Applicants direct the Patent Office’s attention to the specification at, for example, page 2, lines 30-33, where it is disclosed that “[t]he corrugated section of the catheter of the present invention has flexibility to a section of a catheter which is usually rigid with respect to other portions of the body of the catheter.” As the specification describes a corrugated section of a catheter having flexibility to that of another section of the catheter, the specification provides proper written description for Claims 1-5 and 7.

Accordingly, Applicants respectfully submit that the specification complies with the requirements of 35 U.S.C. § 112, first paragraph. Withdrawal of the rejection is respectfully requested.

Referring to pages 3-4 of the Office Action, Claims 1, 2 and 7 stand rejected under 35 U.S.C. § 102(b) as allegedly anticipated by *Dusbabek et al.* (U.S. Patent No. 5,968,069) (“*Dusbabek et al.*”). Applicants respectfully traverse the rejection for the following reasons.

As discussed in the Amendment filed February 8, 2006, the present claimed invention is directed to a catheter and stent combination for insertion into the lumen of a human or animal body. The combination comprises a catheter having a hollow body defined by walls, with proximal and distal ends, wherein at least one section of the walls of the hollow body in the distal region is corrugated and at least one section of the walls of the hollow body in the proximal region is smooth. An inflatable member is disposed radially about the corrugated section and a stent is disposed about the inflatable member, wherein the corrugated section has a flexibility to that of another section of the hollow body.

Unlike the corrugated section of the hollow body recited in amended Claim 1, *Dusbabek et al.* discloses a corrugated section made of a tubular material that is then mounted onto the catheter. In other words, *Dusbabek et al.* discloses two elements (the tubular material and the catheter) that are affixed to one another to form one unit. This corrugated section is located over the catheter and inside the balloon.

Unlike the corrugated section disclosed in *Dusbabek et al.*, the corrugated section recited in Claim 1, is not located over the catheter, but rather, formed of the catheter wall. Thus, the corrugated section recited in amended Claim 1 is a portion of the catheter wall at the distal end. The corrugated section taught by *Dusbabek et al.*, however, is separate from the catheter wall,

the corrugated section being mounted onto the catheter. Accordingly, *Dusbabek et al.* fails to anticipate Claim 1.

As Claim 2 depends upon independent Claim 1, the previous arguments submitted with respect to amended Claim 1 are likewise applicable to Claim 2. Thus, as *Dusbabek et al.* fails to disclose each and every element recited in Claim 2, *Dusbabek et al.* fails to anticipate Claim 2.

Claim 7 recites a catheter wherein at least one section of the walls of the hollow body in the distal region is corrugated and at least one section is smooth, and a stent, wherein the corrugated section has a flexibility to that of another section of the hollow body. As *Dusbabek et al.* fails to teach this embodiment, *Dusbabek et al.* fails to anticipate Claim 7 as well.

In light of the above comments, *Dusbabek et al.* fails to teach a catheter with a corrugated section as recited in Claims 1, 2 and 7, and therefore *Dusbabek et al.* fails to anticipate Claims 1, 2 and 7. Accordingly, Applicants respectfully request the rejection under 35 U.S.C. § 102(b) be withdrawn.

Without admitting that the rejection is correct, and to further distinguish the claimed invention from the cited references, Claim 1 has been amended to recite, wherein the corrugated section is an integral part of the distal wall of the catheter, and has a flexibility to that of another section of the hollow body. *Dusbabek et al.* do not teach or suggest such a catheter and stent combination.

Referring to pages 4-6 of the Office Action, Claims 1-5 and 7 stand rejected under 35 U.S.C. § 103(a) as allegedly unpatentable over *Sullivan et al.* (U.S. Patent No. 6,607,551)

(“*Sullivan et al.*”) in view of *Dusbabek et al.* Applicants respectfully traverse the rejection for the following reasons.

As discussed previously, *Dusbabek et al.* fails to disclose a catheter with a corrugated section as recited in Claims 1-5 and 7, but rather *Dusbabek et al.* teaches a two-piece unit, wherein the corrugated section is mounted onto the catheter. Accordingly, *Dusbabek et al.* fails to anticipate Claims 1-5 and 7.

Sullivan et al. fails to remedy the deficiencies of *Dusbabek et al.* As acknowledged by the Patent Office, *Sullivan et al.* fails to disclose “the presence of an inflatable member, slots and that the body is not hollow as claimed” in the present application. (See Office Action at page 4, paragraph 8.) It is asserted that these embodiments are known in the art and it is concluded that the presently claimed invention would have been obvious from the cited references.

Applicants respectfully submit that even if it is proper to modify the teachings of *Dusbabek et al.* in view of *Sullivan et al.*, a point that is not conceded, it would still not result in the presently claimed invention.

Sullivan et al. discloses a stent delivery system that comprises a stabilizer which is disposed within the stent interior space and has a surface element adapted to engage the stent inner periphery. (See Abstract.) The surface element may comprise a sleeve or a coating having a high friction surface adapted to transmit adequate shear force to the stent to move the stent relative to the outer sheath upon deployment. (See Abstract.) *Sullivan et al.* discloses that the stent may comprise a plurality of peripheral members and that the stabilizer comprises a surface element, but *Sullivan et al.* fails to teach the embodiments recited in Claim 1, including a

catheter and stent combination, where the a catheter has a hollow body defined by walls, with proximal and distal ends, wherein at least one section of the walls of the hollow body in the distal region is corrugated and at least one section of the walls of the hollow body in the proximal region is smooth.

In summary, neither *Dusbabek et al.* or *Sullivan et al.* teach or suggest the present claimed invention as defined in Claims 1-5, and 7. In this regard, Applicants emphasize that the cited art references do not teach or suggest the presently claimed catheter with a corrugated section, much less a corrugated section that is an integral part of the distal wall of the catheter.

Accordingly, Applicants respectfully request the rejection under 35 U.S.C. § 103(a) be withdrawn.

AMENDMENT UNDER 37 C.F.R. § 1.111
U.S. Application No. 10/076,369

Atty. Docket No. Q68587

In view of the above, reconsideration and allowance of this application are now believed to be in order, and such actions are hereby solicited. If any points remain in issue which the Examiner feels may be best resolved through a personal or telephone interview, the Examiner is kindly requested to contact the undersigned at the telephone number listed below.

The USPTO is directed and authorized to charge all required fees, except for the Issue Fee and the Publication Fee, to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.

Respectfully submitted,



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